

Exhibit 7

DECLARATION OF BRIAN MULLIGAN

COMES NOW, Brian Mulligan and pursuant to 28 U.S.C. § 1746, declares under penalty of perjury that the following is true and correct:

1. My name is Brian Mulligan, and I am over 18 years old. I have personal knowledge of the facts as stated herein.
2. I am the father of R.M., who is 14 years old and is in the eighth grade at Stanton River Middle School in the Bedford County Public School Division.
3. R.M. was diagnosed with cystic fibrosis at birth, and as a result of this diagnosis, is immunocompromised. This condition substantially limits the major life activity of breathing and the major bodily functions of the respiratory and immune systems.
4. This condition puts R.M. at higher risk for severe complications if he were to become infected with COVID-19. See Exhibit A (January 24, 2022 Letter from Dr. Deborah K. Froh)
5. R.M.'s treating doctor, the director of the Cystic Fibrosis Center at The University of Virginia, recommends universal masking in the school setting especially for those with conditions that put them at heightened risk, such as cystic fibrosis. See Exhibit A.
6. R.M. is fully vaccinated against COVID-19. Even with the vaccine, R.M. remains at heightened risk of serious illness due to COVID-19.
7. R.M. participated in Virginia Virtual School during the 2020-2021 academic year due to health concerns and the pandemic. The virtual school setting did not provide adequate academic services for R.M.

8. R.M. has attended school in person during the 2021-2022 school year. Our family chose to enroll him in in-person school for the 2021-2022 school year because there was a mask mandate in place in the school.
9. The Bedford County School Board called a special meeting on January 20, 2022, where it voted to make masks optional for schools beginning January 24, 2022.
10. Because there is no longer a mask mandate in Bedford County Public Schools, the majority of students have started attending school without a mask. R.M.'s mother and I are trying to determine whether to keep him home from school for his health and safety.
11. When R.M. is not able to attend school in person he tries to keep up with his classwork by using the Canvas online learning platform, and will even email his teachers. However, R.M. has reported that he falls behind when he has been home for several weeks and has even requested that he go back to school because of this. R.M., his mother, and I are concerned about him falling behind and not receiving social interaction if he cannot safely receive in-person instruction.
12. R.M.'s mother and I have been forced to choose between his education and his health.
13. I am seeking to have EO 2 blocked so that my school will be able to require universal masking as necessary to meet its obligations to my child.

I swear under penalty of perjury under the laws of the United States that the foregoing is true and correct to the best of my knowledge.

Dates this 8th day of February, 2022 at Vinton, Virginia.


Brian Mulligan, Plaintiff

Exhibit A

Pediatric Respiratory Medicine

January 24, 2022

To Whom It May Concern:

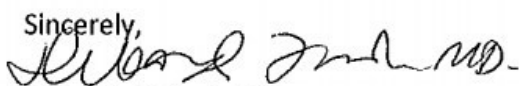
This letter is written in support of upholding the recommendation that masks be worn in indoor public settings, with specific reference to schools. COVID-19 can infect people of all ages and all health statuses, and the currently predominant Omicron variant is highly transmissible. Wearing a mask demonstrably reduces transmission of infective particles, and a recent study demonstrated significantly less spread of the virus at schools with mask requirements compared to those without mask requirements. COVID-19 illness, while often mild, still has the potential to be severe, as demonstrated by over 865,000 dead Americans, including over 1,000 children. Currently there are about 2,000 COVID deaths per day in the U.S., and these are predominantly related to the circulating Omicron strain, so its potential lethality should not be doubted. Likewise, a significant number of COVID patients develop symptoms of "long COVID," which can be debilitating and which may have long-term impacts that have yet to be appreciated, particularly cognitive effects, and children may be more at risk since their systems are still developing. Furthermore, the majority of school aged children in the U.S. have not yet been vaccinated, which puts them at excess risk of COVID-19 infection.

We should be especially considerate to those with underlying conditions, seen and unseen. There are numerous students and teachers who manage chronic illnesses, and for them there is residual risk even if they are vaccinated. My own subspecialty is the care of children with cystic fibrosis (CF), a genetically inherited condition that affects 1 in 3,000 individuals and causes markedly thickened mucus in the lungs. Persons with CF rely on an array of daily treatments and medications and are at greater risk for complications of any respiratory illness, including the common cold, influenza, and COVID. Approximately 10% of people with CF and COVID infection require hospitalization, a rate higher than the general population. Twenty people with CF have died in the U.S. as a result of COVID-19.

Given the extremely high transmissibility of the Omicron variant, and its exploding spread at present, we should be more vigilant than ever about mask wearing in public. Now is not the time to slacken on requirements. We should do everything in our power to protect ourselves, our children, and the more vulnerable members of our community, to get through this pandemic. Limiting the spread of COVID by such a simple measure as wearing a mask can help reduce the occurrence of severe illness to individuals and also reduce the consequences to our overrun healthcare system and to our society when families' education, work, and social support systems are disrupted by the occurrence of COVID.

It is my strong recommendation that all schools continue to require that staff and students wear masks.

Sincerely,



Deborah K. Froh, MD

Director, Cystic Fibrosis Center

Professor of Pediatrics

Department of Pediatric Respiratory Medicine